TRANSMITTAL FORM

Attorney Docket No.
RAL920000115US1
1971P

In re the application Randan Lee BERTRAM, et al.

Serial No: 09/840,400

Confirmation No: 4490

Group Art Unit: 2141

| Filea: | April | 23, 20 | 01 | PA | 40 | | Examine | er: Kar | ng, Paul H. | | |
|--|--|---|----------------|--|------------------------------------|---|--|----------------------|--|-------------------------------|--|
| Filed: April 23, 2001 Examiner: Kang, Paul H. For: Method and System for Pariding and Viewing Performance Analysis of Resource Groups | | | | | | | | | | | |
| ENCLOSURES (check all that apply) | | | | | | | | | | | |
| | Amendment/Reply | | | , | | Assignment and Recordation Cover Sheet | | | After Allowance Communication to Group | | |
| | | After Final | | | Part B-Issue Fee Transmittal | | | Notice of Appeal | | | |
| | Information disclosure statement | | | sure statement | | Letter to Draftsman | | | Appeal Brief | | |
| | | Form 1449 | | | | Drawings | | | Status Letter | | |
| | | (X) Copies of References | | | | Petition | | Postcard | | | |
| | Extension of Time Request * | | | Request * | | Fee Address Indicat | Fee Address Indication Form | | Other Enclosure(s) (please identify below): | | |
| | Express Abandonment | | | ment | | Terminal Disclaimer | | | | | |
| | Certifi | Certified Copy of Priority Doc | | | | Revocation of Prior P | Power of Attorney and Revocation of Prior Powers | | | | |
| | Respo | Response to Incomplete Appln | | | | Change of Correspondence Address | | | | | |
| | Respo | Response to Missing Parts | | | | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), | | | | | |
| | Executed Declaration by Inventor(s) | | | | ŀ | from to . | | | | | |
| | l | | | | L | | | | | | |
| | | | | | | | | | | | |
| | | | | | | CLAIMS | | | | | |
| | FO | R | | Claims Remain | | CLAIMS Highest # of Claims Previously Paid For | Extra Cla | aims | RATE | FEE | |
| Total | FO | | | | | Highest # of Claims Previously Paid For 20 | 0 | aims | \$ 50.00 | \$ 0.00 | |
| | Claims | | | After Amendme | | Highest # of Claims Previously Paid For | | aims | \$ 50.00 \$200.00 | \$ 0.00 \$ 0.00 | |
| | Claims | | | After Amendme | | Highest # of Claims Previously Paid For 20 3 | 0 | aims | \$ 50.00 | \$ 0.00 | |
| | Claims | Claims | | After Amendme | ent | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM | 0 0 | | \$ 50.00 \$200.00 | \$ 0.00 \$ 0.00 | |
| | Claims endent Check | Claims | i | After Amendment 14 3 3 in the amount of | ent | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for | 0 0 ENT payment of | fees. | \$ 50.00 \$200.00 Total Fees | \$ 0.00 \$ 0.00 | |
| | Claims endent Check | k no | i | 14 3 in the amount of to Deposit Account | \$ | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho | 0 0 ENT payment of | fees. | \$ 50.00 \$200.00 Total Fees | \$ 0.00 \$ 0.00 | |
| | Claims endent Check | k no | i | 14 3 in the amount of to Deposit Account | \$ | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for | 0 0 ENT payment of | fees. | \$ 50.00 \$200.00 Total Fees | \$ 0.00 \$ 0.00 | |
| | Claims endent Check | k no | i | After Amendment 14 3 3 in the amount of to Deposit Account credit any overp | \$ | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account N | 0 0 ENT payment of older Name) | fees. for pa | \$ 50.00 \$200.00 Total Fees yment of fees. | \$ 0.00 \$ 0.00 | |
| Indep | Claims endent Check | k no ge \$ ge any fe | ees o | After Amendment 14 3 3 in the amount of to Deposit Account credit any overp | \$unt No | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Hoent to Deposit Account No | 0 0 ENT payment of older Name) | fees. for pa | \$ 50.00 \$200.00 Total Fees yment of fees. | \$ 0.00 \$ 0.00 | |
| Indep | Charge Charge | k no ge \$ ge any fe | Jan | After Amendment 14 3 3 in the amount of to Deposit Account credit any overposit Account Credit any overposit Account Credit any overposit Account Credit Acc | \$ unt No payme | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 | 0 0 ENT payment of older Name) | fees. for pa | \$ 50.00 \$200.00 Total Fees yment of fees. | \$ 0.00 \$ 0.00 | |
| Attorn | Charge Charge | k no ge \$ ge any fe | Jan | After Amendment 14 3 in the amount of to Deposit Account credit any overposit Account and Account any overposit Account any overposit Account and Account | \$ unt No payme | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 | 0 0 ENT payment of older Name) | fees. for pa | \$ 50.00 \$200.00 Total Fees yment of fees. | \$ 0.00 \$ 0.00 | |
| Attorn | Charge Charge | k no ge \$ ge any fe | Jan | After Amendment 14 3 3 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | \$unt No payme URE (Reg. | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 | 0 0 ENT payment of older Name) No. 50-056 | fees. for pa | \$ 50.00 \$200.00 Total Fees yment of fees. | \$ 0.00 \$ 0.00 | |
| Attorn | Claims endent Check Charg Charg ney Nar | c Claims k no ge \$ ge any fe | Jan /Jan Jun | After Amendment 14 3 3 3 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | \$ unt No payme | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 No. 40,095 CERTIFICATE OF MA | 0 0 ENT payment of older Name) No. 50-056 | fees. for pay 3 (IBM | \$ 50.00 \$200.00 Total Fees yment of fees. I Corporation) | \$ 0.00 \$ 0.00 \$ 0.00 | |
| Attorn Signa Date | Charge Ch | c Claims k no ge \$ ge any fe | Jan Jun s corr | After Amendment 14 3 3 3 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | \$ unt No payme | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 No. 40,095 CERTIFICATE OF MA | 0 0 ENT payment of older Name) No. 50-056 | fees. for pay 3 (IBM | \$ 50.00 \$200.00 Total Fees yment of fees. I Corporation) | \$ 0.00 \$ 0.00 \$ 0.00 | |
| Attorn Signa Date | Charge Ch | c Claims k no ge \$ ge any fe me y that this elope add | Jan Jun s corr | After Amendment 14 3 3 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 | \$ unt No paymed Reg. Reg. | Highest # of Claims Previously Paid For 20 3 METHOD OF PAYM is enclosed for (Account Ho ent to Deposit Account No. 40,095 No. 40,095 CERTIFICATE OF MA | 0 0 ENT payment of older Name) No. 50-056 | fees. for pay 3 (IBM | \$ 50.00 \$200.00 Total Fees yment of fees. I Corporation) | \$ 0.00 \$ 0.00 \$ 0.00 | |

Attorney Docket: RAL920000115US1/1971

JUN 1 0 2005

CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on June 8, 2005.

Irena Nikolova

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: June 8, 2005

Randal Lee BERTRAM, et al.

Confirmation No: 4490

Serial No: 09/840,400

Group Art Unit: 2141

Filed: April 23, 2001

Examiner: Kang, Paul H.

For:

METHOD AND SYSTEM FOR PROVIDING AND VIEWING

PERFORMANCE ANALYSIS OF RESOURCE GROUPS

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Final Office Action dated March 28, 2005, please amend the above-identified application in the following manner:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.